

BEFORE THE  
INDEPENDENT CITIZENS' OVERSIGHT COMMITTEE  
AND THE APPLICATION REVIEW SUBCOMMITTEE  
TO THE  
CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE  
ORGANIZED PURSUANT TO THE  
CALIFORNIA STEM CELL RESEARCH AND CURES ACT  
REGULAR MEETING

LOCATION: AS INDICATED ON THE AGENDA

DATE: NOVEMBER 30, 2017  
11 A.M.

REPORTER: BETH C. DRAIN, CSR  
CA CSR. NO. 7152

FILE NO.: 2017-25

I N D E X

ITEM DESCRIPTION	PAGE NO.
OPEN SESSION	
1. CALL TO ORDER.	3
2. ROLL CALL.	3
3. CONSIDERATION OF APPLICATIONS SUBMITTED IN RESPONSE TO TRAN: TRANSLATIONAL REVIEW.	5
4. CONSIDERATION OF APPLICATIONS SUBMITTED IN RESPONSE TO DISC1: INCEPTION REVIEW.	12
CLOSED SESSION	NONE
5. DISCUSSION OF CONFIDENTIAL INTELLECTUAL PROPERTY OR WORK PRODUCT, PREPUBLICATION DATA, FINANCIAL INFORMATION, CONFIDENTIAL SCIENTIFIC RESEARCH OR DATA, AND OTHER PROPRIETARY INFORMATION RELATING TO APPLICATIONS SUBMITTED IN RESPONSE TO TRAN: TRANSLATIONAL REVIEW AND DISC1: INCEPTION REVIEW (HEALTH & SAFETY CODE 125290.30(F) (3) (B) AND (C)).	
OPEN SESSION	
6. PUBLIC COMMENT.	NONE
7. ADJOURNMENT.	26

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

THURSDAY, NOVEMBER 30, 2017; 11 A.M.

CHAIRMAN THOMAS: THANK YOU. I'D LIKE TO WELCOME EVERYBODY TO THE REGULAR MEETING OF THE ICOC AND THE APPLICATION REVIEW SUBCOMMITTEE FOR NOVEMBER 2017. DAVID HIGGINS AND I ARE DOING THIS MEETING FROM THE SANFORD CONSORTIUM, A BEAUTIFUL SPOT DOWN IN LA JOLLA. MARIA, CAN YOU PLEASE CALL THE ROLL.

MS. BONNEVILLE: ANNEMARIE DULIEGE. DAVID HIGGINS.

DR. HIGGINS: HERE.

MS. BONNEVILLE: STEVE JUELSGAARD.

DR. JUELSGAARD: HERE.

MS. BONNEVILLE: SHERRY LANSING. DAVE MARTIN.

DR. MARTIN: HERE.

MS. BONNEVILLE: LAUREN MILLER.

MS. MILLER: HERE.

MS. BONNEVILLE: ADRIANA PADILLA. JOE PANETTA. FRANCISCO PRIETO. ROBERT QUINT. AL ROWLETT.

MR. ROWLETT: HERE.

MS. BONNEVILLE: JEFF SHEEHY. OS STEWARD.

DR. STEWARD: HERE.

1 MS. BONNEVILLE: JONATHAN THOMAS.

2 CHAIRMAN THOMAS: HERE.

3 MS. BONNEVILLE: ART TORRES.

4 MR. TORRES: HERE.

5 MS. BONNEVILLE: DIANE WINOKUR.

6 MS. WINOKUR: HERE.

7 MS. BONNEVILLE: THANK YOU.

8 WE'RE WAITING FOR A COUPLE OF BOARD  
9 MEMBERS TO JOIN.

10 DR. PADILLA: I JUST CALLED IN AGAIN.

11 MS. BONNEVILLE: ARE THERE ANY MEMBERS OF  
12 THE BOARD AT YOUR LOCATION?

13 DR. PADILLA: NO.

14 CHAIRMAN THOMAS: WE HAVE ONE MEMBER OF  
15 THE PUBLIC HERE IN LA JOLLA.

16 MS. BONNEVILLE: ARE THERE OTHER BOARD  
17 MEMBERS ON THE LINE THAT I'VE NOT CALLED? OKAY.  
18 THANK YOU. GO AHEAD, J.T.

19 CHAIRMAN THOMAS: OKAY. THANK YOU,  
20 EVERYBODY. SUPERVISOR SHEEHY WAS NOT ABLE TO MAKE  
21 IT TODAY --

22 MS. BONNEVILLE: HE'S GOING TO JOIN LATE;  
23 BUT IF YOU COULD FILL IN FOR HIM UNTIL HE JOINS,  
24 THAT WOULD BE FANTASTIC.

25 CHAIRMAN THOMAS: SO I WILL PINCH HIT

1 UNTIL HE GETS HERE.

2 WE'LL GO TO ITEM NO. 3 ON THE AGENDA,  
3 CONSIDERATION OF APPLICATIONS SUBMITTED IN RESPONSE  
4 TO THE TRAN OR TRANSLATIONAL REVIEW. WE HAVE A  
5 PRESENTATION, DR. SAMBRANO.

6 DR. SAMBRANO: THANK YOU VERY MUCH, MR.  
7 CHAIRMAN. SO AS YOU KNOW, WE HAVE RECURRING FUNDING  
8 OPPORTUNITIES AVAILABLE ACROSS THE SPECTRUM OF THE  
9 PIPELINE THAT WE FUND RANGING FROM DISCOVERY TO  
10 CLINICAL TRIALS. SO THE TRANSLATION PROGRAM FITS  
11 RIGHT IN THE MIDDLE. ITS GOAL IS TO SUPPORT  
12 PROMISING STEM CELL-BASED PROJECTS THAT WOULD  
13 ACCELERATE COMPLETION OF PROJECTS THAT ARE AT THAT  
14 TRANSLATIONAL STAGE AND ADVANCE THEM ON TO THE  
15 BEGINNINGS OF A CLINICAL STUDY OR BROAD END USE.

16 WE SUPPORT THE DEVELOPMENT OF PRODUCTS  
17 ACROSS DIFFERENT CATEGORIES INCLUDING THERAPEUTICS,  
18 WHICH IS THE MOST POPULAR AND ONE THAT NORMALLY  
19 COMES TO MIND AS A DRUG OR A THERAPY, BUT WE ALSO  
20 SUPPORT DIAGNOSTICS, MEDICAL DEVICES, AND TOOLS FOR  
21 DEVELOPMENT. AND FOR EACH OF THESE THERE ARE  
22 DIFFERENT CRITERIA IN TERMS OF WHAT IS REQUIRED TO  
23 GET TO THAT TRANSLATIONAL STAGE. BUT GENERALLY  
24 SPEAKING, WHAT WE EXPECT FOR A PROJECT COMING INTO  
25 THE TRANSLATION PROGRAM IS THAT IF, FOR EXAMPLE, IT

1 IS A THERAPEUTIC, THAT IT HAS A SINGLE DEVELOPMENT  
2 CANDIDATE THAT HAS DEMONSTRATED DISEASE MODIFYING  
3 ACTIVITY. IF IT'S ONE OF THE OTHER TYPES OF  
4 PRODUCTS, THAT THEY HAVE A PROTOTYPE WHERE THEY'VE  
5 SHOWN A PROOF OF CONCEPT. SO THOSE TYPES OF  
6 PROJECTS ARE READY FOR ENTERING INTO THE  
7 TRANSLATIONAL PHASE. AND THE EXPECTED OUTCOME, ONCE  
8 THEY COMPLETE THOSE TRANSLATIONAL STUDIES, GENERALLY  
9 OVER A TWO-YEAR PERIOD, IS TO CONDUCT A PRE-IND  
10 MEETING IF IT'S A THERAPEUTIC OR ANOTHER  
11 PRESUBMISSION MEETING WITH THE FDA. IF IT HAPPENS  
12 TO BE A TOOL, THERE WE WANT TO SEE THEM TRANSFER TO  
13 MANUFACTURING FOR COMMERCIALIZATION OF THAT PRODUCT.  
14 SO THAT'S A GENERAL BIG PICTURE OF WHAT IT IS THE  
15 TRANSLATION PROGRAM COVERS.

16 THE REVIEW CRITERIA THAT ARE UTILIZED BY  
17 THE GRANTS WORKING GROUP TO ASSESS THE MERIT OF  
18 THESE APPLICATIONS FALLS INTO THESE FOUR BASIC  
19 QUESTIONS. THESE ARE THE ONES THAT OFTEN ARE USED  
20 FOR MOST OF OUR REVIEWS. THE FIRST IS DOES THE  
21 PROJECT HOLD THE NECESSARY SIGNIFICANCE AND  
22 POTENTIAL FOR IMPACT; THAT IS, TRYING TO ASSESS THE  
23 OVERALL VALUE THAT THE PROJECT BRINGS. IS THE  
24 RATIONALE SOUND, MEANING IS IT SOMETHING THAT MAKES  
25 SENSE? DO THEY HAVE DATA TO DEMONSTRATE THAT THEY

1 HAVE WHAT IS NECESSARY TO MOVE FORWARD? IS THE  
2 PROJECT WELL PLANNED AND DESIGNED? AND IS THE  
3 PROJECT FEASIBLE, MEANING DO THEY HAVE A QUALIFIED  
4 TEAM AND ALL THE RESOURCES AVAILABLE TO CONDUCT THE  
5 PROJECT WITHIN THE TIMELINE THAT IS PROPOSED.

6 THE SCORING SYSTEM THAT'S USED IN THE  
7 TRANSLATION PROGRAM IS THE SAME AS FOR ALL DISCOVERY  
8 AND TRAN PROGRAMS, A SCALE OF ONE TO A HUNDRED. A  
9 SCORE OF 85 TO A HUNDRED MEANS THAT IT'S RECOMMENDED  
10 FOR FUNDING IF FUNDS ARE AVAILABLE. ANYTHING THAT  
11 RECEIVES A SCORE OF 1 TO 84 MEANS IT'S NOT  
12 RECOMMENDED FOR FUNDING. WE USE THE MEDIAN FROM ALL  
13 THE INDIVIDUAL GWG SCORES TO DETERMINE THE FINAL  
14 SCORE.

15 (INTERRUPTION IN PROCEEDINGS.)

16 DR. SAMBRANO: SO THAT'S THE SCORING  
17 SYSTEM THAT WE USE FOR THIS PARTICULAR CYCLE OF THE  
18 TRAN PROGRAM. WE HAD 14 APPLICATIONS THAT WERE  
19 REVIEWED. THERE WERE THREE THAT RECEIVED A FUND  
20 RECOMMENDATION. THE TOTAL AMOUNT THAT IS REQUESTED  
21 FROM THE COMBINED THREE APPLICANTS WOULD TOTAL TO  
22 13.4 MILLION. THERE ARE, AT LEAST IN THE ANNUAL  
23 ALLOCATION FOR THIS PROGRAM, SUFFICIENT FUNDS TO  
24 COVER THAT REQUEST.

25 SO I'M GOING TO JUST BRIEFLY REVIEW THE

1 THREE APPLICATIONS THAT ARE RECOMMENDED JUST TO GIVE  
2 YOU AN OVERVIEW OF WHAT THESE ARE ABOUT.

3 THE FIRST APPLICATION IS TRAN1-10416. SO  
4 THIS IS FOR A THERAPEUTIC. IT'S ENTITLED "DBCT  
5 GENETICALLY CORRECTED INDUCED PLURIPOTENT  
6 CELL-DERIVED EPITHELIAL SHEETS FOR DEFINITIVE  
7 TREATMENT OF DYSTROPHIC EPIDERMOLYSIS BULLOSA."

8 SO THIS IS A RARE DISEASE THAT AFFECTS  
9 CHILDREN AND ADULTS, WHICH CAUSES WOUNDING AND  
10 BLISTERING ON THE SKIN AS A RESULT OF A LACK OF  
11 COLLAGEN 7 IN THEIR KERATINOCYTES.

12 SO WHAT THIS WOULD DO IS THE PRODUCT IS A  
13 GENE-MODIFIED CELL THERAPY WHERE THEY WOULD TAKE  
14 CELLS FROM THE PATIENT, CONVERT THEM INTO IPSC'S, DO  
15 THE GENE CORRECTION, AND DIFFERENTIATE THEM INTO  
16 KERATINOCYTES TO CREATE SHEETS THAT WOULD BE APPLIED  
17 TO THE WOUND.

18 THE NEXT APPLICATION IS TRAN1-10587. THIS  
19 ONE IS ENTITLED "HUMAN EMBRYONIC STEM CELL-DERIVED  
20 NATURAL KILLER CELLS FOR CANCER TREATMENT." THE  
21 GOAL HERE IS TO CREATE AN OFF-THE-SHELF CELL THERAPY  
22 FOR TREATING PATIENTS THAT HAVE FAILED DIFFICULT  
23 TREATMENT FOR ACUTE MYELOID LEUKEMIA. WHAT THEY  
24 WOULD GENERATE WOULD BE FROM HUMAN EMBRYONIC STEM  
25 CELLS NATURAL KILLER CELLS THAT UTILIZE THE INNATE

1 IMMUNE SYSTEM TO TARGET CANCER CELLS.

2 THE NEXT APPLICATION IS TRAN1-10540  
3 ENTITLED "SLICING MODULATOR TARGETING CANCER STEM  
4 CELLS IN ACUTE MYELOID LEUKEMIA." THIS IS, AGAIN,  
5 THE SAME DISEASE INDICATION, PATIENTS THAT HAVE  
6 REFRACTORY OR RELAPSING ACUTE MYELOID LEUKEMIA. THE  
7 PRODUCT HERE IS A SMALL MOLECULE THERAPEUTIC WHICH  
8 HAPPENS TO BE AN RNA-SPLICED MODULATOR INHIBITOR.  
9 WHAT THAT DOES IS THAT A CANCER STEM CELL IS  
10 BELIEVED TO HAVE ABERRANT SPLICING OF THEIR SURVIVAL  
11 GENES, SO IT UPSETS THE BALANCE IN THOSE CELLS SO  
12 THAT THEY BECOME RESISTANT TO CHEMOTHERAPY AND OTHER  
13 AGENTS. USING THIS INHIBITOR RESTORES THAT BALANCE  
14 AND ALLOWS THE CELLS TO BECOME SIMILAR TO NORMAL  
15 HEMATOPOIETIC STEM CELLS AND BECOME SUSCEPTIBLE TO  
16 CHEMOTHERAPY.

17 SO THOSE ARE THE THREE PROGRAMS  
18 RECOMMENDED FOR FUNDING. HAPPY TO TAKE ANY  
19 QUESTIONS.

20 CHAIRMAN THOMAS: ANY QUESTIONS FROM  
21 MEMBERS OF THE BOARD?

22 DR. MARTIN: MY QUESTION ON THE LAST ONE  
23 IS WHETHER THE SMALL MOLECULE IS BEING TARGETED TO  
24 THE CANCER STEM CELLS, OR IT'S SIMPLY TARGETING THE  
25 LEUKEMIC CELLS IN TOTO.

1 DR. SAMBRANO: SURE, DR. MARTIN. THE  
2 MOLECULE TARGETS CANCER STEM CELLS BY VIRTUE OF THE  
3 FACT THAT THOSE ARE THE ONES THAT HAVE THE ABERRANT  
4 SPLICING. AND SO ALTHOUGH IT MAY IMPACT OTHER CELL  
5 TYPES, IT IS THE CANCER STEM CELLS THAT ARE BEING  
6 AFFECTED BY THIS INHIBITOR.

7 DR. MARTIN: THANK YOU.

8 CHAIRMAN THOMAS: QUESTIONS FROM MEMBERS  
9 OF THE BOARD? OKAY. HEARING NONE, ARE THERE ANY OF  
10 THE PROJECTS THAT ANYBODY WOULD LIKE TO MOVE FROM  
11 TIER II UP TO TIER I?

12 ARE THERE ANY PROJECTS IN TIER I THAT  
13 ANYBODY WOULD LIKE TO MOVE DOWN TO TIER II? OKAY.  
14 HEARING NONE, I WOULD LIKE TO ENTERTAIN A MOTION  
15 THAT WE APPROVE ALL APPLICATIONS IN TIER I AND NOT  
16 APPROVE THOSE IN TIER II.

17 MR. ROWLETT: SO MOVED.

18 CHAIRMAN THOMAS: THANK YOU, AL. IS THERE  
19 A SECOND?

20 DR. HIGGINS: SECOND.

21 CHAIRMAN THOMAS: SECONDED BY DAVID. IT'S  
22 BEEN MOVED AND SECONDED. DO WE HAVE ANY PUBLIC  
23 COMMENT ON THIS MOTION? HEARING NONE, MARIA, WILL  
24 YOU PLEASE CALL THE ROLL.

25 MR. TOCHER: I JUST WANT TO REMIND

1 MEMBERS, FOR THOSE WHO HAVE A CONFLICT WITH REGARD  
2 TO ANY APPLICATION IN THIS SET, YOU SHOULD REPLY AYE  
3 OR NAY EXCEPT WITH RESPECT TO THOSE APPLICATIONS  
4 WITH WHICH I HAVE A CONFLICT.

5 MS. BONNEVILLE: ANNEMARIE DULIEGE. DAVID  
6 HIGGINS.

7 DR. HIGGINS: YES.

8 MS. BONNEVILLE: STEVE JUELSGAARD.

9 DR. JUELSGAARD: YES.

10 MS. BONNEVILLE: SHERRY LANSING. DAVE  
11 MARTIN.

12 DR. MARTIN: YES.

13 MS. BONNEVILLE: LAUREN MILLER.

14 MS. MILLER: YES.

15 MS. BONNEVILLE: ADRIANA PADILLA.

16 DR. PADILLA: YES.

17 MS. BONNEVILLE: JOE PANETTA. FRANCISCO  
18 PRIETO.

19 DR. PRIETO: AYE.

20 MS. BONNEVILLE: ROBERT QUINT. AL  
21 ROWLETT.

22 MR. ROWLETT: YES.

23 MS. BONNEVILLE: JEFF SHEEHY. OS  
24 STEWARD.

25 DR. STEWARD: YES.

1 MR. TOCHER: OS, JUST REMIND YOU THAT YOU  
2 ARE IN CONFLICT WITH ONE OF THESE.

3 DR. STEWARD: YES, EXCEPT FOR THOSE WITH  
4 WHICH I'M IN CONFLICT.

5 MS. BONNEVILLE: JONATHAN THOMAS.

6 CHAIRMAN THOMAS: YES.

7 MS. BONNEVILLE: ART TORRES.

8 MR. TORRES: AYE.

9 MS. BONNEVILLE: DIANE WINOKUR.

10 MS. WINOKUR: YES.

11 MS. BONNEVILLE: MOTION CARRIES.

12 CHAIRMAN THOMAS: THANK YOU, MARIA.

13 ON TO ITEM NO. 4 ON THE AGENDA, WHICH IS  
14 CONSIDERATION OF APPLICATIONS SUBMITTED IN RESPONSE  
15 TO THE DISC INCEPTION REVIEW. WE HAVE A  
16 PRESENTATION BY DR. SAMBRANO.

17 DR. SAMBRANO: MR. CHAIRMAN, SO, AGAIN,  
18 THIS IS THE SAME DIAGRAM I SHOWED BEFORE REGARDING  
19 OUR FUNDING OPPORTUNITIES SIMPLY TO POINT OUT WHERE  
20 THE INCEPTION PROGRAM FITS. THIS IS AT THE VERY  
21 BEGINNING OR ONSET OF OUR FUNDING OPPORTUNITIES IN  
22 THE DISCOVERY PROGRAM WHICH IS INTENDED TO SPAWN THE  
23 DEVELOPMENT OF GREAT NEW IDEAS. AND SO THAT IS  
24 ESSENTIALLY WHAT WE'RE LOOKING FOR IN THIS PROGRAM.

25 THE EMPHASIS OF THE GRANTS WORKING GROUP

1 REVIEW, THAT IS, THE GUIDANCE THAT WE GAVE TO OUR  
2 REVIEWERS, WAS THAT WE'RE LOOKING FOR GREAT NEW  
3 IDEAS WITH THE POTENTIAL TO RESULT IN A TRANSLATABLE  
4 HUMAN STEM PROGENITOR CELL-BASED PRODUCT OR  
5 TECHNOLOGY EVENTUALLY DOWN THE ROAD. WE EMPHASIZE  
6 THAT THE IDEAS WITH A SOUND SCIENTIFIC RATIONALE ARE  
7 IMPORTANT. IT IS ESSENTIAL WITHIN THE CRITERIA, BUT  
8 ALSO THAT PRELIMINARY DATA ARE NOT REQUIRED OR  
9 EXPECTED AT THIS STAGE. THIS IS THE VERY BEGINNING  
10 OF A PROJECT IDEA; AND SO, THEREFORE, PRELIMINARY  
11 DATA IS NOT NECESSARY HERE. AND THIS IS A HIGH  
12 RISK, HIGH REWARD PROGRAM. SO WE ARE CERTAINLY  
13 WILLING TO TAKE A RISK ON THE POTENTIAL DEVELOPMENT  
14 OF AN IDEA.

15 OF COURSE, THE GOAL HERE IS TO PROVIDE 150  
16 K TO TEST THAT IDEA AND GENERATE DATA THAT WOULD  
17 ALLOW THE APPLICANT TO COMPETE FOR A LARGER, MORE  
18 SUBSTANTIAL FUNDING OPPORTUNITY WHETHER IT BE WITH  
19 CIRM OR ANOTHER FUNDER.

20 THE SCORING SYSTEM IS THE SAME AS WE USE  
21 WITH TRAN, MEANING 85 TO A HUNDRED MEANING IT'S  
22 MERITORIOUS; 1 TO 84, THAT REVIEWERS FEEL IT WAS NOT  
23 SUFFICIENT TO BE RECOMMENDED FOR FUNDING.

24 FOR THIS CYCLE OF DISC1, WE HAD 41  
25 APPLICATIONS THAT WERE REVIEWED. THERE WERE 13 THAT

1 RECEIVED A SCORE BETWEEN 85 AND A HUNDRED. AND THE  
2 TOTAL AMOUNT FOR THOSE, TO FUND THOSE 13 PROGRAMS,  
3 IS \$2.87 MILLION APPROXIMATELY.

4 MR. CHAIRMAN, I'M HAPPY TO GO THROUGH JUST  
5 A VERY BRIEF OVERVIEW OF EACH OF THESE, THERE ARE  
6 13, OR I CAN ADDRESS SPECIFIC QUESTIONS, IF THERE  
7 ARE ANY, OF ANY OF THE APPLICATIONS AS THE GROUP  
8 DESIRES.

9 CHAIRMAN THOMAS: I WOULD GUESS --  
10 THANK YOU FOR THE PRESENTATION, DR. SAMBRANO. I  
11 WOULD GUESS THAT MEMBERS OF THE SUBCOMMITTEE HERE  
12 HAVE HAD A CHANCE TO REVIEW THE SLIDES. SO I'LL  
13 JUST ASK ARE THERE ANY QUESTIONS FROM ANY MEMBERS  
14 ABOUT ANY OF THE SPECIFIC PROJECTS LISTED IN THE  
15 PRESENTATION? OKAY.

16 HEARING NONE, DO WE HAVE ANY MOTIONS BY A  
17 MEMBER OF THE SUBCOMMITTEE TO MOVE ANY PROJECTS FROM  
18 TIER II TO TIER I?

19 DR. HIGGINS: I WOULD LIKE TO MAKE A  
20 MOTION A MOVE DISC-10674, A NEW PHENOTYPIC SCREENING  
21 PLATFORM, FROM THE UNFUNDED TO THE FUNDED CATEGORY.

22 MR. TORRES: COULD YOU EXPLAIN THE  
23 RATIONALE PLEASE?

24 DR. HIGGINS: I CAN EXPLAIN IT NOW OR  
25 AFTER THE MOTION IS SECONDED.

1 MR. TORRES: THANK YOU.

2 CHAIRMAN THOMAS: TO GET THE DISCUSSION  
3 GOING HERE, I'LL SECOND THE MOTION.

4 DR. HIGGINS: I'D LIKE TO SPEAK. I  
5 ACTUALLY WANT TO EXPLAIN IN AS MUCH A NONSCIENTIFIC  
6 WAY AS A SCIENTIFIC WAY BECAUSE DR. NIENABER CAN DO  
7 THAT BETTER THAN I CAN. BUT PARKINSON'S DISEASE HAS  
8 BEEN DESCRIBED, WAS FIRST DESCRIBED OVER 200 YEARS  
9 AGO, BUT THE MOST COMMON DRUG THAT WE STILL TAKE  
10 TODAY IS OVER 70 YEARS OLD. THERE ARE SIMPLY  
11 NOTHING BUT REFORMULATIONS OF LEVODOPA AS SO-CALLED  
12 NEW DRUGS. SO WE'RE IN DESPERATE NEED.

13 SO I'M NOT AN EXPERT IN THE TECHNOLOGY,  
14 BUT I AM AN EXPERT IN PARKINSON'S. I KNOW WHAT IT  
15 MEANS TO NEED THESE NEW DRUGS. I DON'T KNOW IF YOU  
16 GUYS KNOW, BUT I'M A FOURTH GENERATION PARKINSON'S  
17 IN MY FAMILY. AND HERE WE ARE IN 2017, AND I TAKE  
18 THE SAME DRUG THAT MY GRANDMOTHER TOOK IN THE 1960S.

19 SO THIS PROPOSAL IS TO SET UP A SCREEN TO  
20 HELP IDENTIFY NEW DRUGS FOR PARKINSON'S IN A NUMBER  
21 OF WAYS, WHICH DR. NIENABER CAN DESCRIBE. BUT IT  
22 SEEMS TO ME LIKE IT FITS PERFECTLY WITH CIRM'S  
23 CRITERIA THAT THEY'RE TRYING TO ACHIEVE, THAT GIL  
24 JUST DESCRIBED. IT'S A SMALL AMOUNT OF MONEY, SORT  
25 OF LIKE SEED MONEY, FOR GREAT IDEAS THAT QUALIFIED

1 SCIENTISTS CAN DO. THAT REQUIRES PRELIMINARY DATA  
2 AND ENCOURAGES OUT-OF-THE-BOX THINKING, ETC., ETC.  
3 I THINK THAT THIS PROPOSAL FITS EVERY ONE OF THOSE  
4 CRITERIA.

5 AND I BELIEVE THAT THIS GRANT REPRESENTS  
6 EXACTLY THE KIND OF WORK THAT THE CIRM INCEPTION RFA  
7 IS DESIGNED TO PROMOTE. SO I'M ASKING THE COMMITTEE  
8 TO RECOMMEND FUNDING OF THIS GRANT, AND I'D BE HAPPY  
9 TO ANSWER ANY QUESTIONS FROM MY PERSPECTIVE.

10 CHAIRMAN THOMAS: SENATOR TORRES, DID THAT  
11 ANSWER THE QUESTION?

12 MR. TORRES: YES. THANK YOU SO MUCH.

13 CHAIRMAN THOMAS: ARE THERE QUESTIONS OR  
14 COMMENTS FROM MEMBERS OF THE BOARD ON THIS MOTION?

15 DR. PRIETO: WHAT WAS THE SCORING ON THIS  
16 APPLICATION?

17 CHAIRMAN THOMAS: I BELIEVE, DR. SAMBRANO,  
18 CORRECT ME IF I'M WRONG, I BELIEVE IT GOT AN 80.

19 DR. SAMBRANO: THAT'S CORRECT.

20 DR. PRIETO: WERE THERE ANY SPECIFIC  
21 CONCERNS RAISED IN THE DISCUSSION? I DON'T RECALL  
22 THE SPECIFICS OF THIS ONE.

23 DR. SAMBRANO: YES. SO THERE WERE SOME  
24 CONCERNS. I THINK THE LARGEST OR THE MAJOR CONCERN  
25 WAS RELATED TO VALIDATING THE TECHNOLOGY. SO WHAT

1 REVIEWERS WERE LOOKING FOR WAS DEMONSTRATION THAT  
2 THIS SCREENING TECHNOLOGY WOULD ALLOW YOU TO  
3 IDENTIFY A POTENTIAL, NOT ONLY A THERAPEUTIC TARGET,  
4 BUT ALSO A SMALL MOLECULE DRUG THAT WOULD ACT ON  
5 THAT TARGET IN ANOTHER DISEASE MODEL. SO, FOR  
6 EXAMPLE, IF YOU LOOKED AT CARDIAC ARRHYTHMIAS WHERE  
7 YOU HAVE A CLEAR, KNOWN PHENOTYPE AND IF YOU LOOKED  
8 AT DRUGS THAT ARE KNOWN TO ACT ON IT IN ORDER TO  
9 TEST THE TECHNOLOGY AND SHOW THE PROOF OF CONCEPT.

10 DR. PRIETO: TECHNICALLY WE DON'T REQUIRE  
11 THAT SORT OF PRELIMINARY DATA FOR THIS ROUND,  
12 CORRECT?

13 DR. SAMBRANO: WE DO NOT.

14 DR. PRIETO: OKAY. THANK YOU.

15 CHAIRMAN THOMAS: OTHER QUESTIONS?

16 DR. MARTIN: QUESTION. THERE WAS AN  
17 APPEAL LETTER. THAT I DON'T REMEMBER, BUT WAS THAT  
18 FOR THE SAME APP?

19 CHAIRMAN THOMAS: NO. THAT WAS FOR ONE OF  
20 THE TRANSLATIONAL APPLICATIONS.

21 MS. BONNEVILLE: THERE IS A LETTER FOR  
22 THIS APPLICATION THAT WAS SUBMITTED, J.T.

23 CHAIRMAN THOMAS: I'M SORRY. I THOUGHT  
24 YOU WERE REFERRING TO THE ONE IN THE TRANSLATIONAL.

25 MS. BONNEVILLE: THERE IS ONE THERE AS

1 WELL.

2 CHAIRMAN THOMAS: THANK YOU, MARIA. THANK  
3 YOU FOR CORRECTING ME ON THAT.

4 DR. JUELSGAARD: WHICH APPLICATION NUMBER  
5 ARE WE TALKING ABOUT AGAIN?

6 DR. SAMBRANO: THIS IS 10674.

7 DR. JUELSGAARD: OKAY. THANK YOU.

8 CHAIRMAN THOMAS: DR. SAMBRANO, DO WE HAVE  
9 A COMMENT ON THIS APPLICATION BY THE TEAM?

10 DR. SAMBRANO: WE DO NOT.

11 CHAIRMAN THOMAS: OKAY. I, FOR ONE, BASED  
12 ON THE EXCHANGE WITH DR. PRIETO AND DR. SAMBRANO  
13 THAT WE JUST HAD, WHICH REFERENCED THAT PARTICULAR  
14 CRITERIA THAT SEEMS TO HAVE BEEN THE MAJOR ISSUE  
15 HERE ISN'T ONE THAT TYPICALLY APPLIES FOR A  
16 INCEPTION AWARD. AND GIVEN THE NEED FOR GREAT, NEW  
17 IDEAS IN PARKINSON'S, I, FOR ONE, WOULD SUPPORT  
18 MOVING THIS APPLICATION FROM TIER II TO TIER I.

19 DR. HIGGINS: AS WOULD I.

20 MS. WINOKUR: SO WOULD I.

21 DR. MARTIN: IN THE CONTEXT OF THE APPEAL  
22 LETTER THAT, I THINK, ADDRESSED, AT LEAST IN MY  
23 MIND, WHAT THE ISSUES WERE, I WOULD ALSO. THIS IS  
24 DAVE MARTIN.

25 CHAIRMAN THOMAS: THANK YOU, DR. MARTIN.

1 THANK YOU, MS. WINOKUR.

2 OKAY. IF THERE AREN'T ANY OTHER COMMENTS  
3 HERE, SO --

4 DR. STEWARD: I WILL ALSO VOTE IN FAVOR OF  
5 THIS, BUT I WOULD SAY NOT ON THE BASIS OF THE APPEAL  
6 LETTER, BUT RATHER ON THE BASIS OF DAVID'S COMMENTS  
7 AND GIL'S WITH RESPECT TO THE CRITERIA. I AM  
8 CONCERNED ABOUT ANY RE-REVIEW IN TERMS OF TECHNICAL  
9 MERIT AND ALWAYS DEFER TO THE GRANTS WORKING GROUP  
10 FOR THEIR ORIGINAL SCORING. HOWEVER, I AM MOVED BY  
11 DAVID'S APPEAL ON THIS, AND I DO THINK THAT IT'S  
12 WORTH THIS AMOUNT OF MONEY TO GIVE THIS A TRY.  
13 THANK YOU.

14 CHAIRMAN THOMAS: THANK YOU, DR. STEWARD.  
15 ANY OTHER COMMENTS FROM MEMBERS OF THE  
16 BOARD? SO TO MOVE THIS FROM TIER II TO TIER I, WE  
17 HAVE A MOTION. MARIA, WILL YOU PLEASE CALL THE  
18 ROLL.

19 MS. BONNEVILLE: WE WOULD NEED TO TAKE  
20 PUBLIC COMMENT FIRST.

21 CHAIRMAN THOMAS: SORRY. PUBLIC COMMENT?  
22 I THINK WE DO HAVE PUBLIC COMMENT HERE DOWN IN LA  
23 JOLLA.

24 DR. NIENABER: THANK YOU. THIS IS  
25 DR. NIENABER, PI ON THE GRANT. I HAVE WORKED IN

1 DRUG DISCOVERY FOR 30 YEARS, AND IT'S CLEAR TO ME  
2 NOW THAT WE NEED A PARADIGM SHIFT IN HOW WE APPROACH  
3 DIFFICULT DISEASES LIKE PARKINSON'S. WE CHOSE TO  
4 FOCUS ON PARKINSON'S DISEASE BECAUSE IT SPEAKS TO AN  
5 UNMET NEED, EVEN THOUGH WE KNEW IT WOULD BE MORE  
6 CHALLENGING THAN OTHER DISEASES.

7 AT ZENOBIA WE HAVE THERAPY FOR PD, OUR  
8 DISCOVERY PARADIGM THAT WORKED FOR CANCER AND OTHER  
9 DISEASES, BUT HAVE NOT WORKED FOR PD. LIKE THOSE  
10 BEFORE US, OUR COMPOUNDS BEHAVE VERY WELL IN MODELS,  
11 BUT SOME DO NOT BEHAVE AS PREDICTED IN NEURONS IN AN  
12 ANIMAL MODEL. TO OVERCOME THESE LIMITATIONS, WE  
13 DEVELOPED A NOVEL APPROACH WHICH LED US TO CIRM AND  
14 THE DISC1 GRANT.

15 WE'RE VERY EXCITED TO LEARN THAT THE  
16 REVIEWERS BELIEVE WE HAVE A, QUOTE, BY CHANCE OF  
17 IDENTIFYING A NOVEL CANDIDATE DRUG FOR PD, THAT WE  
18 UNDERSTAND AND ADDRESS MANY OF THE CHALLENGES IN THE  
19 FIELD, AND THAT OUR SCIENCE IS SOLID AND INNOVATIVE.  
20 OUR TECHNOLOGY IDENTIFIES COMPOUNDS THAT IMPROVE  
21 PARKINSON GENOTYPES DIRECTLY IN PATIENT-DERIVED  
22 NEURONS AND IDENTIFIES A UNIQUE SET OF CLINICAL  
23 REACTION. THIS COULD TAKE YEARS OFF THE DISCOVERY  
24 TIMELINE BY REMOVING THE NEED FOR EARLY ASSUMPTIONS  
25 AND MODEL SYSTEMS. OTHER SCREENING METHODS REQUIRE

1 BIASED STUDIES WHICH LEAD BACK TO THE SAME OLD  
2 ISSUE.

3 FURTHERMORE, PARKINSON'S IS LIKELY TO  
4 ADVANCE DISEASE, AND IT IS UNLIKELY THAT ONE SINGLE  
5 THERAPY WILL WORK FOR ALL PATIENTS. OUR GOAL IS TO  
6 IDENTIFY PERSONALIZED TREATMENTS AND SIDE-BY-SIDE  
7 DIAGNOSTIC TESTS FOR CLINICAL TRIALS IN  
8 PATIENT-DERIVED CELLS. AFTER PD THERE IS NO REASON  
9 WHY THIS TECHNOLOGY COULD NOT BE BROADENED TO OTHER  
10 RELATED DISEASES SUCH AS ALZHEIMER'S, HUNTINGTON'S,  
11 ALS, OR EVEN BRAIN INJURY.

12 AS YOU DISCUSSED, THE PRIMARY CONCERN OF  
13 THE REVIEWERS IS THAT WE DIDN'T PROVIDE PRELIMINARY  
14 DATA, AND THIS WAS A MISUNDERSTANDING IN READING THE  
15 RFA, BUT I UNDERSTAND IT'S HELPFUL. TO CLARIFY, THE  
16 CHEMISTRY HAS BEEN VALIDATED IN THE LABORATORY BY  
17 OUR COLLABORATOR, DR. BARRY SHARPLESS, WHO RECEIVED  
18 THE NOBEL PRIZE IN CHEMISTRY IN 2001. SPECIFICALLY,  
19 AS HE PUBLISHED LAST YEAR, "THE CHEMISTRY  
20 (INAUDIBLE) HAS BEEN IDENTIFIED AND VALIDATED AS  
21 TARGETS OF THE COMPOUND. IN HIS MIND THERE IS NO  
22 ISSUE TRANSLATING FROM HUMAN TO NEURONAL CELLS.

23 DR. JOHN MOSES (INAUDIBLE.)

24 THE REPORTER: I'M SORRY, MR. CHAIRMAN.  
25 THERE IS INTERFERENCE ON THE LINE AND I'M UNABLE TO

1 UNDERSTAND.

2 MR. TORRES: HOW ABOUT CALLING FOR THE  
3 QUESTION?

4 CHAIRMAN THOMAS: I THINK SENATOR TORRES  
5 CALLED FOR THE QUESTION, WHICH I THINK THE MEMBERS  
6 OF THE SUBCOMMITTEE UNDERSTAND AND ARE READY TO VOTE  
7 HERE. THANK YOU, MR. SENATOR. I'M NOT SURE WHAT  
8 THAT STATIC WAS, BUT IS THERE ANY OTHER PUBLIC  
9 COMMENT ON THIS? MARIA, WILL YOU PLEASE CALL THE  
10 ROLL.

11 MS. BONNEVILLE: DAVID HIGGINS.

12 DR. HIGGINS: YES.

13 MS. BONNEVILLE: STEVE JUELSGAARD.

14 DR. JUELSGAARD: YES.

15 MS. BONNEVILLE: DAVE MARTIN.

16 DR. MARTIN: YES.

17 MS. BONNEVILLE: LAUREN MILLER.

18 MS. MILLER: YES.

19 MS. BONNEVILLE: ADRIANA PADILLA.

20 DR. PADILLA: YES.

21 MS. BONNEVILLE: FRANCISCO PRIETO.

22 DR. PRIETO: AYE.

23 MS. BONNEVILLE: AL ROWLETT.

24 MR. ROWLETT: YES.

25 MS. BONNEVILLE: JEFF SHEEHY.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

MR. SHEEHY: YES.

MS. BONNEVILLE: OS STEWARD.

DR. STEWARD: YES.

MS. BONNEVILLE: JONATHAN THOMAS.

CHAIRMAN THOMAS: YES.

MS. BONNEVILLE: ART TORRES.

MR. TORRES: AYE.

MS. BONNEVILLE: DIANE WINOKUR.

MS. WINOKUR: YES.

MS. BONNEVILLE: MOTION CARRIES.

CHAIRMAN THOMAS: OKAY. THANK YOU. MR. SUPERVISOR, CAN I TURN THIS OVER TO YOU AT THIS POINT? WE ARE AT THE STAGE ON AGENDA ITEM NO. 4 WHERE I WAS ABOUT TO ASK IF THERE ARE ANY MEMBERS OF THE SUBCOMMITTEE THAT WOULD LIKE TO MOVE ANY OF THE PROJECTS FROM TIER I DOWN TO TIER II.

SUPERVISOR SHEEHY: YOU CAN GO AHEAD, J.T. I'VE GOT A BIT OF CATCHING UP TO DO.

CHAIRMAN THOMAS: THANK YOU.

MS. BONNEVILLE: YOU MAY WANT TO CONFIRM THAT THE SUBCOMMITTEE DOESN'T HAVE ANY OTHER APPLICATIONS THAT THEY'D LIKE TO MOVE UP BEFORE WE MOVE ON.

CHAIRMAN THOMAS: THANK YOU, MARIA. ARE THERE ANY OTHER APPLICATIONS THAT ANY MEMBERS OF THE

1 SUBCOMMITTEE WOULD LIKE TO MOVE UP FROM TIER II TO  
2 TIER I? OKAY.

3 HEARING NONE, ARE THERE ANY OF THE  
4 APPLICATIONS ANY MEMBERS OF THE SUBCOMMITTEE WOULD  
5 LIKE TO MOVE DOWN FROM TIER I TO TIER II?

6 HEARING NONE, I WOULD LIKE TO ENTERTAIN A  
7 MOTION THAT WE APPROVE ALL APPLICATIONS IN TIER I,  
8 INCLUDING THAT THAT WE JUST MOVED UP, AND NOT TO  
9 APPROVE THOSE APPLICATIONS IN TIER II. DO I HEAR  
10 SUCH A MOTION?

11 DR. HIGGINS: SO MOVED.

12 CHAIRMAN THOMAS: MOVED BY DR. HIGGINS,  
13 SECONDED BY?

14 DR. PRIETO: SECOND.

15 CHAIRMAN THOMAS: SECONDED BY DR. PRIETO.  
16 SO WE ARE MOVED AND APPROVED. DO WE HAVE ANY PUBLIC  
17 COMMENT ON THIS MOTION? HEARING NONE, MARIA, WILL  
18 YOU PLEASE CALL THE ROLL.

19 MR. TOCHER: AGAIN, I'D JUST LIKE TO  
20 INSTRUCT THE BOARD MEMBERS TO VOTE AYE OR NAY EXCEPT  
21 FOR THOSE WITH WHICH THEY HAVE A CONFLICT. I CAN  
22 SIMPLIFY IT. OS, IT'S JUST YOU TODAY.

23 MS. BONNEVILLE: DAVID HIGGINS.

24 DR. HIGGINS: YES.

25 MS. BONNEVILLE: STEVE JUELGAARD.

1 DR. JUELSGAARD: YES.  
2 MS. BONNEVILLE: DAVE MARTIN.  
3 DR. MARTIN: YES.  
4 MS. BONNEVILLE: LAUREN MILLER.  
5 MS. MILLER: YES.  
6 MS. BONNEVILLE: ADRIANA PADILLA.  
7 DR. PADILLA: YES.  
8 MS. BONNEVILLE: FRANCISCO PRIETO.  
9 DR. PRIETO: AYE.  
10 MS. BONNEVILLE: AL ROWLETT.  
11 MR. ROWLETT: YES.  
12 MS. BONNEVILLE: JEFF SHEEHY.  
13 MR. SHEEHY: YES.  
14 MS. BONNEVILLE: OS STEWARD.  
15 DR. STEWARD: YES, EXCEPT FOR THOSE WITH  
16 WHICH I HAVE A CONFLICT.  
17 MS. BONNEVILLE: JONATHAN THOMAS.  
18 CHAIRMAN THOMAS: YES.  
19 MS. BONNEVILLE: ART TORRES.  
20 MR. TORRES: AYE.  
21 MS. BONNEVILLE: DIANE WINOKUR.  
22 MS. WINOKUR: YES.  
23 MS. BONNEVILLE: MOTION CARRIES.  
24 CHAIRMAN THOMAS: THANK YOU, MARIA. THAT  
25 CONCLUDES ITEM NO. 4.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

ARE THERE ANY PUBLIC COMMENTS ON ANY  
TOPICS THAT MEMBERS OF THE PUBLIC WOULD LIKE TO  
SPEAK ON AT THIS POINT? HEARING NONE, THAT  
CONCLUDES TODAY'S MEETING. WE STAND ADJOURNED.  
THANK YOU VERY MUCH, EVERYBODY.

(THE MEETING WAS THEN CONCLUDED AT  
11:36 A.M.)

REPORTER'S CERTIFICATE

I, BETH C. DRAIN, A CERTIFIED SHORTHAND REPORTER IN AND FOR THE STATE OF CALIFORNIA, HEREBY CERTIFY THAT THE FOREGOING TRANSCRIPT OF THE TELEPHONIC PROCEEDINGS BEFORE THE INDEPENDENT CITIZEN'S OVERSIGHT COMMITTEE AND THE APPLICATION REVIEW SUBCOMMITTEE OF THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE IN THE MATTER OF ITS REGULAR MEETING HELD ON NOVEMBER 30, 2017, WAS HELD AS HEREIN APPEARS AND THAT THIS IS THE ORIGINAL TRANSCRIPT THEREOF AND THAT THE STATEMENTS THAT APPEAR IN THIS TRANSCRIPT WERE REPORTED STENOGRAPHICALLY BY ME AND TRANSCRIBED BY ME. I ALSO CERTIFY THAT THIS TRANSCRIPT IS A TRUE AND ACCURATE RECORD OF THE PROCEEDING.

BETH C. DRAIN, CA CSR 7152  
133 HENNA COURT  
SANDPOINT, IDAHO  
(208) 255-5453